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TO:	Robert L. Nasser, Examiner, Art Unit 3736
COMPANY:	United States Patent and Trademark Office
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TOTAL NO. PAGES:	11
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COMMENTS/MESSAGE: Re: Serial No. 09/540,319 Our Ref. LFS-093

Confirming our telephone conversation today, attached is a copy of the response mailed on March 11, 2003, together with a copy of the return receipt postcard. Thank you for your attention to this matter.

Regards,
Jane Silarajs

PTO/SB/21 (01-09)

Approved for use through 04/30/2003. OMB 0651-0031
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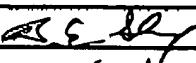
(To be used for all correspondence after initial filing)

TRANSMITTAL FORM (To be used for all correspondence after initial filing)		Application Number	09/540,319
		Filing Date	03/31/2000
		First Named Inventor	Robert Justice SHARTLE et al.
		Art Unit	3736
		Examiner Name	Robert L. NASSER
Total Number of Pages in This Submission	6	Attorney Docket Number	LFS-093

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	Bernard E. Shay Reg. No. 32,061	
Signature		
Date	2/10/03	

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03-11-2003

Typed or printed	Jane Silarajs	
Signature		Date 03-11-2003

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LFS-093

Title: <u>Electrically-Conductive Patterns for Monitoring the Filling of the Device</u> Inventors/Applicant: <u>Shurtle, Robert et al</u>																									
Application Serial No.: <u>09/540319</u>	Filing Date: <u>03/31/2000</u>																								
Type of Application: <input type="checkbox"/> Provisional <input type="checkbox"/> Original <input type="checkbox"/> CIP <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> CPA <input type="checkbox"/> PCT																									
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Clms. \$ _____ <input type="checkbox"/> Surcharge \$ _____ <input type="checkbox"/> Extension of time fee \$ _____ <input type="checkbox"/> Cont. Filing Rgt. Fee \$ _____ <input type="checkbox"/> Issue fee/adv. order \$ _____ <input checked="" type="checkbox"/> Other fee \$ 110 </td> </tr> <tr> <td colspan="2"> <input type="checkbox"/> <i>Mixing Parts of Application Transmittal</i> <ul style="list-style-type: none"> <input type="checkbox"/> Declaration/Oath <input type="checkbox"/> Decl./Power of Attorney _____ pages <input type="checkbox"/> Power of Attorney <input type="checkbox"/> P. of Atty. by Assignee _____ pages <input type="checkbox"/> Assignment/Form PTO 1595 _____ pages </td> <td> <input type="checkbox"/> Chapter II Request/Fee Sheet <input type="checkbox"/> Response-Invitation to Correct <input type="checkbox"/> Article 34 <input type="checkbox"/> Article 19 <input type="checkbox"/> Response to Written Opinion </td> <td></td> </tr> <tr> <td colspan="2"> <input type="checkbox"/> <i>PCT International Application Request Form</i> <ul style="list-style-type: none"> <input type="checkbox"/> Specification _____ pages <input type="checkbox"/> Claims _____ pages <input type="checkbox"/> Abstract _____ pages <input type="checkbox"/> Drawings _____ pages </td> <td></td> <td></td> </tr> <tr> <td colspan="2"> <input type="checkbox"/> Express Mail Certificate No. _____ <input checked="" type="checkbox"/> First Class Mail <input checked="" type="checkbox"/> Authorization to Charge Deposit Account No. 10-0750 </td> <td colspan="2"> <input checked="" type="checkbox"/> Other: <u>Patent Office; Terminal Disclosure 04/05/21; Postcard</u> </td> </tr> <tr> <td>Attorney Docket No. <u>LFS-093</u></td> <td>Attorney: <u>BBS</u></td> <td>Date Mailed: <u>03-11-2003</u></td> <td>Date Due: <u>04-05-2003</u></td> </tr> </table>		Transmittals		Common US Items	Fee Related	<input type="checkbox"/> <i>Transmittal of Patent Application</i> <ul style="list-style-type: none"> <input type="checkbox"/> Specification and Abstract _____ pages <input type="checkbox"/> Claim _____ pages <input type="checkbox"/> Drawings _____ pages 		<input type="checkbox"/> Extension of time _____ mo. <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449 with _____ references <input type="checkbox"/> Issue Fee <input type="checkbox"/> Formal Drawings	<input checked="" type="checkbox"/> Fee Transmittal (SR/17) <ul style="list-style-type: none"> <input type="checkbox"/> Filing Fee \$ _____ <input type="checkbox"/> Excess Dep. 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